

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**

SERIAL NO.

10780731

FILING DATE

02-19-04

APPLICANT(S)

**CLAIMS**

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	1					
2		1				
3		2				
4	1					
5	1					
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TOTAL IND.	6					
TOTAL DEP.	7					
TOTAL CLAIMS	13					

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